

# Resilience in Practice: The Roles of Vietnamese Social Organizations in Pandemic Prevention

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**Abstract:** This paper investigates the resilience of Vietnamese social organizations through their roles and in response to the COVID-19 pandemic. While international literature highlights the crucial contribution of social organizations to public health crises, especially in the post-pandemic recovery phase, scientific analysis of Vietnamese counterpart's has remained scarce. Drawing on empirical data of the situation of social organizations in Hanoi and Hồ Chí Minh City during and after the COVID-19, this article explores how these organizations participated in pandemic prevention, what internal and external resources they mobilized, and how they evaluated their own impact. By examining organisational characteristics such as type, operational scope, field of activity, human resources, funding sources, and relationships with the state, the paper provides a multi-dimensional view of social organizations' engagement during the crisis. The analysis identifies key factors influencing the capacity of social organizations to adapt, maintain operations, and respond effectively under extreme pressure. In doing so, it contributes to a deeper understanding of the sector's flexibility, responsiveness, and evolving role in pandemic governance in Vietnam.

**Keywords:** Social organizations, COVID-19, resilience, Vietnam, pandemic governance.

**Subject classification:** Sociology.

## 1. Introduction

The COVID-19 pandemic communities have created not only an unprecedented public health emergency but also a far-reaching social and institutional crisis that has tested the resilience of governments and systems. Vietnam's initial pandemic response in early 2020 was widely recognized for its success. Through rapid containment strategies, coordinated coordination, and an

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intensive public communication campaign, captured in the slogan “fighting the pandemic like fighting the enemy”, the country maintains low infection and fatality rates in the early stages. This state-led approach, grounded in public trust and mobilization, was initially effective in curbing viral spread.

Yet as the crisis evolved into a prolonged, multi-wave emergency, new challenges emerged. The emergence of novel variants and the socio-economic toll of extended restrictions expose the limits of a state-centric model. Vietnam, like many other countries, was forced to shift from top-down crisis containment to more adaptive, decentralized, and community-based forms of governance. In this context, the involvement of social organizations - including mass organizations, professional associations, and non-governmental organizations - became increasingly vital in reaching vulnerable populations, sustaining community support, and supplementing public service gaps.

While international research has highlighted the critical role of social organizations in pandemic governance, the Vietnamese case remains insufficient in academic literature. Existing accounts are often anecdotal or media-based, lacking systematic analysis of how Social organizations contributed, adapted, and evaluated their role. Vietnam presents a particularly compelling context for such inquiry: its civil society landscape is hybrid and semi-institutionalized, with some social organizations embedded within the state apparatus, others navigating more constrained and autonomous spaces. This ambiguity raises important questions about how structural position and internal resources influence organizational engagement in crisis contexts.

This article addresses that gap by examining how Vietnamese social organizations responded to the COVID-19 pandemic, using resource mobilization theory to analyze the internal participation factors shaping their resilience. Drawing on a structured survey of 262 organizations in Hanoi and Hồ Chí Minh City, the study investigates (1) the forms of social organizations’ engagement, (2) the types of resources they mobilized, and (3) how they assessed their own impact. By focusing on internal organizational characteristics- such as type, operational and geographical scope, staffing, and funding- the study contributes new empirical evidence on the adaptive capacity of social organizations in Vietnam, and offers theoretical insight into how resource-based variables shape social organizations’ resilience under crisis.

## **2. Literature review: Organizational resilience in crisis contexts**

### *Shrinking public space and social restriction*

The COVID-19 pandemic has intensified longstanding concerns about the shrinking space for public sector, especially in Southeast Asia where states have increasingly imposed restrictions on social organizations (Lorch & Sombatpoonsiri 2020; Nixon 2020; Gomez 2020; Bethke & Wolf, 2020). This trend is not new- it has been debated since the early 2000s under the “shrinking space” framework

(Carothers & Brechenmacher, 2014; Poppe & Wolf 2017). During the pandemic, state-enforced social distancing and restrictions on movement further curtailed social sector's operations, limiting in-person activities and disrupting service delivery (Bethke & Wolf 2020). Social organizations across different national contexts struggled to reach target populations, maintain services, and remain financially viable.

*Social organizations in COVID-19 pandemic*

Empirical studies from various countries, such as Turkey and Austria illustrate how the pandemic altered the functioning of social organizations - affecting service priorities, financial stability, and operational methods (Doğan & Genç 2021; Meyer et al. 2021). Larger social organizations with complex bureaucracies faced significant setbacks due to reduced mobility and disrupted funding. Conversely, grassroots networks and flexible community-based organizations were often quicker to recover and adapt. In China, the crisis encouraged the emergence of new social organization alliances and inter-organizational networks that functioned effectively even under strict state control (Hu 2020). Globally, many social organizations leveraged digital tools, restructured their service delivery models, and expanded their roles in mutual aid and local coordination (Nixon et al. 2020; Nampoothiri & Artuso 2021).

These international patterns highlight two critical shifts: first, a reorientation toward internal resource mobilization as reliance on international donors diminished; second, a growing emphasis on flexibility, localism, and digital transformation. These shifts are particularly relevant for analyzing social organizations' responses in hybrid governance contexts like Vietnam.

In Vietnam, social science research on social organizations during the COVID-19 remains limited, despite the documented societal consensus in supporting state-led pandemic responses. Existing literature focuses largely on the role of state institutions, with little systematic attention paid to social organizations. Yet observations from media and public discourse indicate that social organizations - including mass organizations and volunteer groups- played diverse roles, such as distributing aid, raising funds, coordinating logistics, and disseminating information. For example, the Vietnam Fatherland Front mobilized nearly 160 billion VND during the first wave of the pandemic (Pham, 2020), while grassroots initiatives like "rice ATMs" and 0-VND supermarkets proliferated across cities. These activities point to a vibrant but under examined sector whose contributions span both formal and informal domains. While mass organizations are closely aligned with the state, other social organizations operate in more constrained institutional spaces. This hybrid structure poses unique questions about resource mobilization, operational autonomy, and crisis resilience.

Despite the growing visibility of social organizations during the pandemic, no empirical research has yet systematically analyzed their internal resources, modes of participation, or perceived impacts. This study addresses that gap by

examining how Vietnamese social organizations adapted to crisis conditions and mobilized their organizational capacities. In doing so, it contributes to broader theoretical discussions of resilience and resource mobilization while offering empirical insight into Vietnam's evolving social sector under pandemic stress.

### **3. Theoretical approach and research method**

#### ***3.1. Concepts***

The term “social organization” refers broadly to voluntary, non-profit, and non-governmental entities (Bùi Thế Cường, 2005; Bùi Quang Dũng, 2007; Nguyễn Đức Vinh 2013; Wischermann & Dang, 2018; Đặng Thị Việt Phương, 2021). In the Vietnamese context, these include mass organizations (e.g. including the Labor Federation, Women's Union, Farmers' Association, Youth Union, Veterans' Association), professional associations, non-governmental organizations, social organizations, and other voluntary groups. For analytical clarity, this study categorizes social organizations into three groups based on their relationship with the state and functional activities: (1) mass organizations, (2) professional associations, and (3) NGOs as the rest of organizations. The research examined organizations with at least five years of operation to ensure stability and relevant crisis experience.

The term “resilience” comes from the Latin word “resilire” (which means to leap or jump back). It was first produced in the field of ecology (Holling, 1973), and gradually has been developed in various social science disciplines. Since the beginning of the 21st century, together with major social challenges that has enhanced social awareness, the concept of resilience has become especially important (Folke, 2006). Folke argues that resilience should not be viewed as a state, but as an ongoing process: “Resilience is a dynamic concept focusing on how to persist with change [...], how to evolve with change” (Folke 2016, p. 44). That is, resilience is not focused on the issue of a stable order, but rather on considering the potential and resources to overcome problems, turning uncertainties into opportunities for innovation (see also Vogt and Schneider 2016; Hirschmann et al. 2020). This understanding sees resilience through processes of adaptation, learning, and innovation. This is especially true when a system not only endures (i.e. takes on) a challenging situation and maintains the status quo (recovers), but also continues to develop (moves forward). Adaptability or adaptation is central to resilience (Kölbel & Erckrath 2023). A system or an organization is resilient if its components are able to respond to changing conditions and disruptions by integrating experience and knowledge, developing innovative solutions, and learning from overcoming problems (Folke 2006).

#### ***3.2. Theoretical framework***

This study draws on interdisciplinary theoretical discussions of civil society and resource mobilization. While the global literature on civil society is often based on liberal democratic assumptions- viewing civil society as a counterweight to the state and a space for autonomous participation- these concepts require careful adjustment in a context where civil society is embedded within state structures, and the boundaries between state and non-state actors are blurred (Wischermann, 2010).

Vietnam's civil society landscape is best described as semi-institutionalized and hybrid (Kerkvliet, 2003; Gainsborough, 2010), where social organizations do not exist outside the state, but operate within negotiated spaces shaped by party-state oversight, sectoral politics, and informal patronage networks. In such a context, civil society actors do not engage in outright opposition but through selective cooperation and institutional adaptation (Malesky & Schuler, 2010). This makes Vietnamese social organizations a compelling case study for studying how non-state actors overcome constraints while still creating public value, especially during crises.

This paper adopts resource mobilization theory as an analytical framework to examine the resilience and crisis response of social organizations in Vietnam during the COVID-19 pandemic. Originally developed in the 1970s by scholars such as McCarthy & Zald (1977), resource mobilization theory emphasizes that successful collective action depends on the strategic acquisition, management, and deployment of resources.

In the context of the COVID-19 crisis, resource mobilization theory provides a useful lens to analyze how different types of Vietnamese social organizations mobilized resources to sustain in the pandemic. This framework directs attention to internal organizational variables that shape an organization's capacity to act, including type of organizations, scope of operation, staff, human capital and financial resources. The framework also facilitates comparative analysis: Do social organizations with diversified funding bases respond more effectively than those reliant on a single donor? Does a broader operational scope enhance or constrain local responsiveness?

Combining these two theories- civil society theory and resource mobilization theory, this article positions Vietnamese social organizations not as static entities but as adaptive actors operating in the pandemic. The analysis pays particular attention to how factors such as organizational type (ie. whether they are mass organizations, professional associations or NGOs), scope of operations and other resources determine both the capacity and form of participation in the pandemic.

### ***3.3. Sampling and survey research technique***

Hanoi and Hồ Chí Minh City were selected as study sites due to their high concentration of active social organizations. The research sample was developed using the sample of 711 social organizations extracted from the 2021 national economic census as the primary population, supplemented by a panel dataset of 300 social organizations surveyed by our research team in 2009. Only organizations

with at least five years of operation were included. After removing duplicates, the sample was stratified into three groups: Group 1 (mass organizations), Group 2 (professional associations), and Group 3 (NGOs). A total of 262 organizations were randomly selected through cluster sampling, in which 121 in Hồ Chí Minh City and 141 in Hanoi. By type of organization, the study sample included 41 organizations in Group 1 (15.6%), 124 organizations in Group 2 (47.3%) and 97 organizations in Group 3 (37%). Data collection was carried out from June to September 2024 via face-to-face interview method with social organizations' representatives, using semi-structured questionnaires. The data used for analysis in this article include questions related to social organizations' participation in COVID-19 prevention and control.

## **4. Findings**

### ***4.1. Participation of social organizations in pandemic prevention***

The survey reveals that approximately two-thirds of the 262 social organizations in Hanoi and Hồ Chí Minh City confirmed their involvement in COVID-19 prevention efforts. Community mobilization and donation are the two most common forms of participation of these organizations. Among the primary forms of engagement were raising public awareness campaigns, fundraising and donations, volunteer mobilization, and participation in frontline efforts such as community COVID-19 teams. While nearly 80% had some form of prior experience with community initiatives, statistical testing indicates that such experience was not a significant predictor of participation during the pandemic, suggesting that the crisis elicited widespread mobilization regardless of organizational history.

A comparison of social organizations' participation in COVID-19 prevention between Hanoi and Hồ Chí Minh City reveals a higher engagement rate in Hanoi. Specifically, nearly 76% of surveyed social organizations in Hanoi reported their involvement in pandemic prevention activities, whereas only 57% of social organizations in Hồ Chí Minh City indicated such participation. In both cities, the most commonly reported forms of involvement were communication, community mobilization, and the dissemination of information related to pandemic prevention. Depending on their scale, scope of operations, and target populations, social organizations employed a variety of communication strategies. Many organizations proactively produced and distributed printed media materials to reach individuals at the grassroots level.

During periods of prolonged social distancing, numerous social organizations adapted by shifting to digital communication platforms, including social media, text and voice messaging tools with wide reach, to ensure timely and effective information dissemination. The content of these communications typically focused on regulations related to pandemic prevention and control, as well as maintaining public order and safety at quarantine facilities, field hospitals, and

within communities and households. Through their communication and advocacy efforts, social organizations played a vital role in enhancing public awareness, fostering community consensus and compliance, and ultimately contributing to the containment of the corona virus.

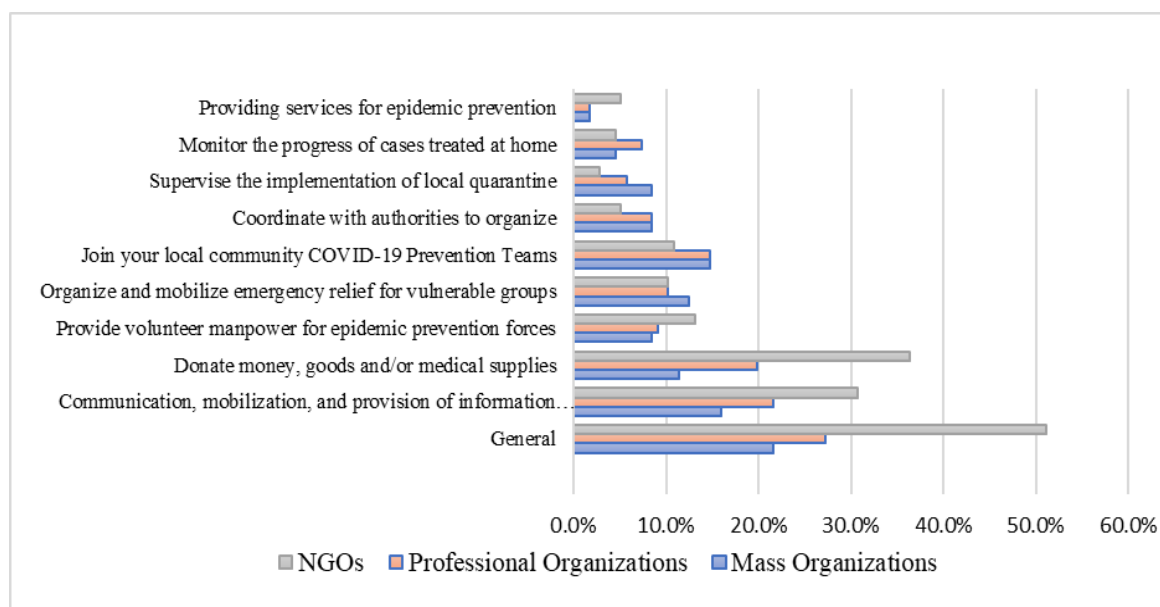
The second most common activity that social organizations reported participating in was donating money and supporting in kind for pandemic prevention. Our survey did not record the specific amount that each organization has supported for pandemic prevention. However, the report on the results of mobilizing, managing, and using resources for COVID-19 prevention and control by the Central committee of the Vietnam Fatherland Front showed that the organization has received abundant financial resources through fundraising campaigns throughout the pandemic periods, from the COVID-19 vaccine fund in the early stages to funding and support in terms of money, medical supplies, necessities, and food to directly support frontline forces or affected communities (Central Committee of the Vietnam Fatherland Front, 2023).

In addition to the two popular activities above, social organizations in both cities also reported their participation in providing volunteer manpower for pandemic prevention forces, organizing and mobilizing emergency relief for vulnerable groups, and joining local community COVID-19 Prevention Teams. Below, we will examine possible resource factors that organizations could or could not have mobilized that influenced their participation in pandemic prevention.

#### *Organizational type*

When divided by type of organizations, our research findings show clear variations. NGOs made up the largest share of participating organizations (51.1%), followed by professional associations (27.3%), and mass organizations (21.6%). This distribution reflects both the relative abundance of NGOs in the sample and their agility in resource mobilization. With organizational flexibility and an orientation toward small communities and specific tasks, NGOs reported their active participation in pandemic response activities. These organizations were particularly active in communication, advocacy, and distributing essential goods, often capitalizing on established community trust and access to donor networks. In contrast, mass organizations were more involved in on-the-ground, government-coordinated actions, such as contact tracing and monitoring quarantine compliance-tasks aligned with their administrative structure and proximity to local authorities. It is worth noting that this research finding is based on the self-reports of representatives of the surveyed organizations about their participation in pandemic prevention. There is currently no assessment and statistics on the actual participation and contribution of each of these types of organizations in the pandemic prevention period.

**Figure 1.** Social organizations' participation in pandemic prevention by types of organizations (%)



Examining the participation in pandemic prevention activities of different types of social organizations, the survey results showed that three groups of organizations have different roles in preventing COVID-19. Chi-squared tests confirmed a statistically significant relationship between organizational type and forms of participation (Chi-squared = 32.37; df = 12;  $p < 0.01$ ). This confirms that different types of organizations tend to participate in different activities in response to the pandemic. Specifically, NGOs have a higher participation rate in communication, advocacy, and donation activities, reflecting their advantages in social mobilization experience and having an immediate and stable connection channel with beneficiaries. Meanwhile, mass organizations tend to play a more prominent role in local community activities such as participating in community COVID teams, providing emergency relief, and coordinating quarantine monitoring and tracing cases.

Statistical analysis of each type of activity separately showed that three activities had a very strong association with the type of organization, including (i) participating in community COVID teams ( $p < 0.001$ ), (ii) organizing emergency relief ( $p < 0.001$ ), and (iii) coordinating tracing cases ( $p < 0.001$ ). In all three activities, mass organizations and professional associations played a dominant role, reflecting their strong connectivity and presence at the local level. Meanwhile, activities such as donations, communication, and human resource mobilization did not show significant differences between types of organizations, suggesting that these activities could be flexibly implemented by all types of social organizations.

#### *Organizational scope, staff, and scope of operation*

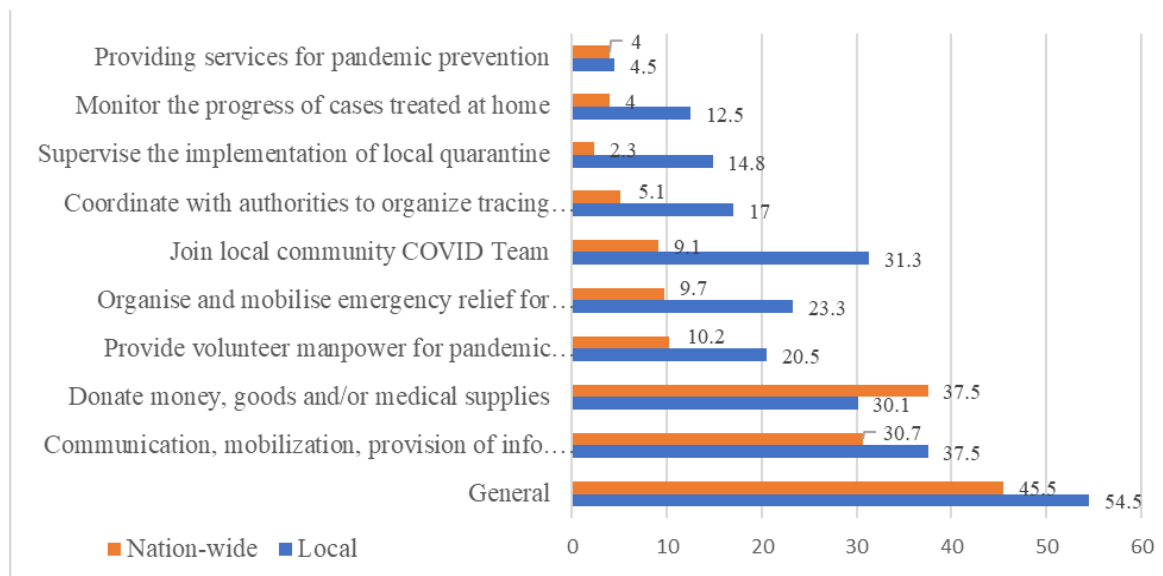
While the data analysis showed clear differences in organizational type, we did not find any correlation between geographic scope or whether social organizations had leaders who had worked in the public sector and their



participation in the response to the pandemic. This suggested that in the context of an emergency, social organizations have stepped outside their usual scope of activities to participate in emergency response activities. Both “state-sponsored” organizations and other social organizations have been able to actively participate in community support. This reflected the high flexibility and cross-sectoral mobilization capacity of social organizations during the crisis.

This figure illustrates the differential participation rates of Vietnamese social organizations in pandemic prevention activities according to their operational scope, revealing distinct patterns of engagement between locally-focused and nationally-oriented entities. Local organizations demonstrated substantially higher participation rates across most activities, particularly in direct community engagement roles such as joining local community COVID teams (31.3% versus 9.1% for nation-wide organizations) and coordinating with authorities for contact tracing (17% versus 5.1%). The data indicates that local organizations were more actively involved in hands-on prevention activities including supervising quarantine implementation (14.8% versus 2.3%) and monitoring home-treated cases (12.5% versus 4%). Both types of organizations showed comparable high engagement in communication efforts (37.5% and 30.7%), while nation-wide operated organizations were more dominant in resource mobilization activities such as donations, with 37.5% compared to 30.1% of the local ones. In sum, nation-wide organizations exhibited broader but less intensive involvement compared to the focused, community-embedded activities characteristic of local organizations, highlighting the complementary roles these different organizational types played in Vietnam’s pandemic response strategy.

**Figure 2.** Social organizations’ participation in pandemic prevention by scope of operation (%)



Staffing size also played a critical role. Small organizations (fewer than six

staff members) primarily engaged in low-resource activities like advocacy or informational outreach. Meanwhile, larger organizations (20+ staff) were significantly more likely to participate in multi-actor collaborations and high-effort initiatives such as contact tracing, community response coordination, and emergency relief. Examining the correlation between participation in pandemic prevention and the size of the organization's staff also showed a statistically significant relationship (Chi-squared = 47.63; df = 27;  $p < 0.01$ ), confirming the relevance of human capital as a predictor of organizational resilience.

#### *Financial structure and strategic engagement*

The study also examined the link between funding structure and organizations' participation during the pandemic time. All surveyed organizations had at least one source of funding. Almost 60% of organizations received funding from the state to carry out tasks assigned by the state, more than half of the organizations got their operating funding from activities providing services, consulting, implementing programs, projects, and topics; nearly 40% of organizations had revenue from fees and membership dues of members. Meanwhile support from domestic individual donors (7.4%) and international sources (1.7%) remained limited.

**Table 1.** Social organizations participation in pandemic prevention by financial sources (%)

Types of participation	Social organizations' financial sources				
	State funding to carry out assigned tasks	Funding from providing services, etc.	Members hip fees	Funding from Viet individuals/ institutions	Funding from individuals/ institutions abroad
1. Participating in at least one activity	59.4	50.3	38.9	7.4	1.7
2. Communication, mobilization, and provision of information on pandemic prevention	44.0	30.3	27.4	4.6	0.6
3. Donate money, goods and/or medical supplies	38.3	37.1	28.0	6.3	1.1
4. Provide volunteer manpower for pandemic prevention forces	20.6	12.6	12.6	1.7	0.6
5. Organize and mobilize emergency relief for vulnerable groups	24.0	13.7	12.0	1.1	0.0
6. Join your local community	30.9	12.0	9.7	2.9	1.1

## COVID-19 Prevention Teams

7. Coordinate with authorities to organize disease tracing and close contacts	19.4	4.6	5.1	2.3	1.1
8. Supervise the implementation of local quarantine	15.4	1.7	1.7	1.7	1.1
9. Monitor the progress of cases treated at home	14.9	3.4	4.0	2.3	1.1
10. Providing services for pandemic prevention	4.6	2.9	5.1	1.1	1.1

The social organizations' pandemic prevention participation rates are different across three distinct funding categories: state funding, self-generated revenue (from service provision and membership fees), and external funding (from domestic and international individuals/institutions). The research results show that the most common activities were carried out mostly by organizations that received funding from government agencies or from service providers. These are the two largest sources of funding for most organizations, which were the basis for their participation in pandemic prevention. State-funded organizations demonstrated the highest participation rates across nearly all activities, with 59.4% engaging in at least one pandemic prevention activity, followed by substantial involvement in communication and mobilization efforts (44.0%) and donation activities (38.3%). Organizations relying on self-generated revenue through service provision showed notably high participation in donation activities (37.1%) and maintained moderate engagement across other activities, whilst those funded through membership fees displayed more variable participation patterns with stronger involvement in communication activities (27.4%) but lower rates in operational tasks. External funding sources showed markedly different patterns, with organizations receiving domestic funding participating at modest levels across most activities (7.4% general participation for Vietnamese sources), whilst internationally-funded organizations exhibited the lowest participation rates across all categories (1.7% general participation). This funding-based analysis reveals that financial autonomy and state alignment significantly influence the scope and intensity of civil society engagement in crisis response, with state-funded organizations serving as primary implementers, self-funded organizations contributing substantial resources, and externally-funded organizations maintaining more limited but consistent involvement in Vietnam's pandemic prevention efforts.

The above analysis shows that the internal resources of the organization such as the type of organization, the scope of the organization's activities, the size of the staff and the source of funding were factors that had a great influence on the participation of social organizations in pandemic prevention activities. These findings reinforce the resource mobilization theory claim that resource availability, and more importantly, the structure and type of those resources, plays a determining

role in shaping how organizations respond to crisis. Not only does funding affect scale and scope, but the nature of resource flows (state-linked versus independent) influences alignment with different response functions, whether community-oriented or state-coordinated.

#### ***4.2. Organizational self-assessment of strengths***

Surveyed social organizations were also asked to reflect on what they considered their organizational strengths during the pandemic. Responses varied by organizational type. Mass organizations cited administrative mandate and strong human resources as key enablers, with 81.6% indicating they acted under directive or state coordination. Professional associations pointed to institutional stability (70.2%) and relevance of professional expertise to pandemic prevention (44.7%) as their advantages. NGOs, by contrast, reported strength in financial autonomy (36.0%) and operational flexibility (59.3%) as enabling factors.

These patterns reflect the institutional embeddedness and operating mechanisms of each organizational group. Mass organizations were structurally advantaged in state-led efforts but limited in flexibility. NGOs operated with more autonomy but lacked scale in personnel. Professional associations occupied a middle ground, leveraging both sectoral knowledge and sustained operations.

#### ***4.3. Perceived impact of activities***

Finally, social organizations were asked to assess their own impact across 11 thematic areas. The most highly rated impacts included: awareness-raising and network-building activities achieved the highest overall rates across all organization types. The most frequently reported impact was increasing disease awareness and knowledge among beneficiaries (57.6%), followed by strengthening connections among local organizations (48.1%) and acting as policy bridges between government and communities (46.9%), suggesting that Vietnamese social organizations' primary contributions centered on information dissemination and social capital formation rather than direct service delivery.

Mid-level impacts clustered around relationship-building and resource supplementation functions, with 41.9% of organizations reporting strengthened state-social organizations relationships and 41.2% supplementing financial resources for pandemic prevention, indicating substantial but not universal success in these intermediary roles. The lower total percentages for expanding communication channels (27.8%) and achieving direct health outcomes through morbidity and mortality changes (16.0%) highlight the limitations of social sector impact on technical infrastructure and clinical outcomes, reflecting both resource constraints and the appropriately distinct roles of social versus medical institutions in pandemic response. From a resource mobilization perspective, these patterns demonstrate that

Vietnamese social organizations were most effective when leveraging their existing comparative advantages in community engagement, information networks, and stakeholder coordination, whilst acknowledging their limited capacity to directly influence health systems outcomes that require specialized medical expertise and infrastructure beyond their organizational mandates.

**Table 2.** Self-assessment of social organizations' impacts on pandemic prevention by types of social organizations (%)

Social organizations' impacts on pandemic prevention	Type of organization			
	Mass Org	Prof. Asso	NGO	Total
Increase awareness & knowledge of the disease among people/beneficiaries	21.0	32.4	32.4	57.6
Strengthen connections among local social organizations	21.0	25.0	25.6	48.1
Act as a bridge to bring pandemic prevention policies to people/beneficiaries	20.5	22.7	26.7	46.9
Strengthen state- social organizations relationship	18.8	25.0	18.8	41.9
Supplement financial resources for pandemic prevention	13.6	25.6	22.2	41.2
Strengthen relationship between govt. & people	19.3	18.2	19.9	38.5
Change citizens/beneficiaries' attitudes & behaviors towards govt.	18.8	19.9	18.2	38.1
Strengthen human resources for pandemic prevention	19.9	18.2	18.2	37.7
Supplement food and food support for people/beneficiaries	17.6	18.2	19.9	37.4
Expand coverage of pandemic prevention communication channels	9.7	19.3	12.5	27.8
Changes in morbidity and mortality	6.8	8.5	8.5	16.0

Table 2 describes the self-assessed impacts of different organizational types on pandemic prevention, providing insights into how organizational characteristics and resource capacities shaped their contributions to Vietnam's crisis response. From a resource mobilization perspective, the data demonstrates that professional associations and NGOs, despite potentially smaller membership bases, leveraged their specialized knowledge and networks more effectively than mass organizations, with both types reporting identical rates (32.4%) for increasing disease awareness among beneficiaries compared to mass organizations' 21.0%. Professional associations particularly excelled in resource mobilization functions, reporting the highest rates for supplementing financial resources (25.6%) and strengthening state-social organization relationships (25.0%), reflecting their established connections with both government agencies and private sector actors. NGOs showed their strongest comparative advantage in policy translation and network building, with 26.7% reporting success in bridging pandemic prevention policies to communities

and 25.6% in strengthening local organization connections, demonstrating their traditional intermediary role between state and society. The consistently lower self-assessments by mass organizations across most categories (ranging from 6.8% to 21.0%) suggests that despite their extensive reach and state backing, their hierarchical structure and broad mandate may have limited their effectiveness in specialized crisis response activities. These patterns reflect the institutional embeddedness and operating mechanisms of each organizational group. Mass organizations were structurally advantaged in state-led efforts but limited in flexibility. NGOs operated with more autonomy but lacked scale in personnel. Professional associations occupied a middle ground, leveraging both sectoral knowledge and sustained operations.

## **5. Conclusion**

This study aims to understand how Vietnamese social organizations have responded to the COVID-19 pandemic, with a particular focus on the internal organizational factors that have shaped their engagement and resilience. Drawing on resource mobilization theory and set against the hybrid and semi-institutionalized context of the Vietnamese civil society context, the paper hypothesizes that organizational resilience is closely related to the types of social organizations and their ability to strategically mobilize internal resources. These resources include the scope of operations, human resources and financial structure.

The empirical findings confirm this hypothesis. Organizational type plays a decisive role in determining how social organizations engage in pandemic preparedness, with mass organizations primarily active in state-led local initiatives, while NGOs and professional associations were more likely to be involved in communication, policy advocacy, and resource allocation. The scope of activities and human resources also influenced the scale and nature of engagement, with larger state-funded organizations taking on more labor-intensive responsibilities, and smaller community-based or member-funded groups focusing on awareness raising and social support. Funding structures have further shaped engagement patterns, with different funding sources associated with distinct activities.

These findings reinforce the analytical utility of resource mobilization theory in explaining the differential capacities and strategies of social organizations in crisis conditions. Importantly, they show that resilience in this context was not simply about endurance but also about adaptability through the strategic use of resources. Vietnamese social organizations have demonstrated remarkable flexibility, often going beyond their usual roles to respond to urgent needs, thereby acting as complementary partners within the broader public health governance framework.

The study also contributes to filling a significant gap in the literature on civil

society in Vietnam by providing empirical evidence on the effectiveness of social organizations in public health emergencies. The study calls for supportive and coordinated crisis policies that are sensitive to the internal capacities and institutional positions of different types of social organizations. As countries and regions prepare for future crises, understanding the heterogeneity of civil society and tailoring support mechanisms accordingly will be critical to building inclusive and resilient systems.

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